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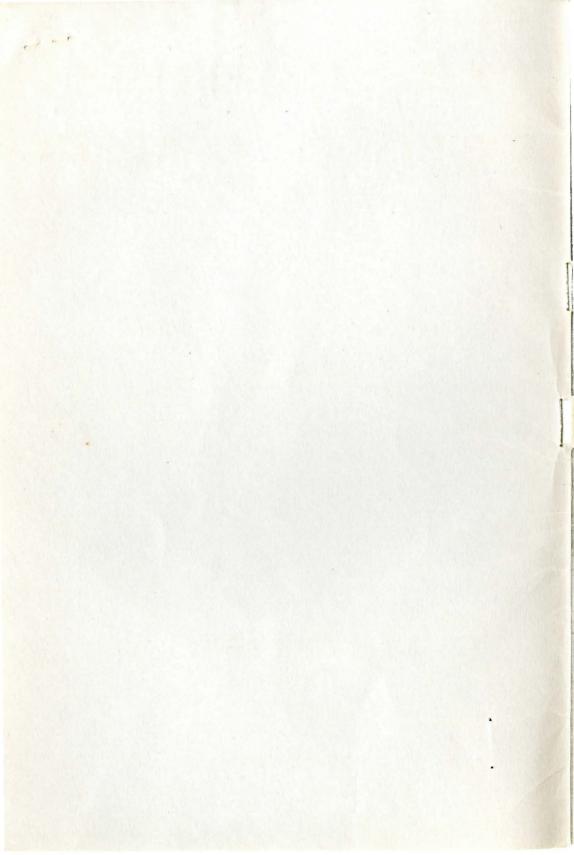
THE STATE SERVICES FOR CRIPPLED CHILDREN

State Service for

State University of Iowa
Iowa City

R. R. Rembolt, M.D. Director

March 1950



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This booklet contains the general policies of the State Services for Crippled Children of Iowa. Details are omitted. For further information please write to:

THE DIRECTOR

STATE SERVICES FOR CRIPPLED CHILDREN

STATE UNIVERSITY OF IOWA

IOWA CITY, IOWA

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The State Services for Crippled Children State University of Iowa Iowa City

INTRODUCTION

The State of Iowa has an area of 56,280 square miles, and a population which the United States Bureau of Census estimated at 2,625,000 on July 1, 1948. The 1940 census classed 42.7 percent as urban and 57.3 percent as rural. There are 99 counties in the State.

The State Services for Crippled Children was introduced into / Iowa in July, 1936, after approval of the program was obtained from the Iowa State Medical Society's Board of Councilors. It was placed under the administration of the Iowa State Board of Education. Its inception came about when federal aid was granted to the state for services for crippled children through the Social Security Act approved August 14, 1935. This Act, Title V, Part 2, made possible the development of a nation-wide program of medical, surgical and aftercare services for the physical restoration and social readjustment of crippled children. The administration of this service is charged to the Children's Bureau of the United States Federal Security Agency.

DEFINITION OF A CRIPPLED CHILD

No legal definition of a crippled child exists in Iowa. At present, however, the program is directed to include patients 20 years of age and under of sound mentality who are crippled as a result of orthopedic conditions, defects which are amenable to plastic surgery, rheumatic fever, any abnormalities of the heart, actinomycosis, diabetes, nephritis, nephrosis, tuberculous meningitis, convulsive disorders, and speech and hearing defects.

ADMINISTRATION

The personnel of the Iowa State Services for Crippled Children consists of the Executive Director, who is also Medical Director of the Hospital-School for Severely Handicapped Children and a member of the Pediatric Staff of the College of Medicine; consultants in orthopedic surgery; pediatric consultants; a supervisor of nursing and physical therapy; a supervising medical social consultant; a field staff of public health nurses and medical social consultants; a physical therapist who works in the Hospital-School for Severely Handicapped Children and in field clinics; an occupational therapist who works in the Hospital-School for Severely Handicapped Children; a records librarian and office manager; and clerical staff. A close liaison exists between the medical social staff of the University Hospitals and that of the State Services for Crippled Children although these departments are independent administratively. The nursing service of the State Services for Crippled Children serves as a coordinating

agent between the out-patient and in-patient services in Children's Hospital and other nursing agencies in the State. An administrative diagram appears on the following page.

THE OFFICIAL STATE AGENCY

The State Board of Education is designated by law as the official agency charged with the duty of cooperating with the United States Children's Bureau in the administration of the Crippled Children's program. The State University of Iowa is specified as being in actual charge of the work. Thus, the offices of the State Services for Crippled Children are located on the State University of Iowa campus. This Agency functions under the State Board of Education in cooperation with the College of Medicine. State Services for Crippled Children is not a department of the University Hospitals.

TYPES OF PATIENTS SERVED

Diagnostic conditions accepted in the Iowa State Services for Crippled Children's program are approved by the Children's Bureau. The current list of crippling conditions which are included in the plan is as follows:

1. All chronic crippling conditions of the locomotor system.

2. Crippling conditions remediable by plastic surgery.

3. Poliomyelitis.

4. Rheumatic fever, rheumatic heart disease, congenital cardiac defects and other types of heart disease.

5. Diabetes Mellitus.

6. Tuberculous meningitis.

7. Actinomycosis.8. Nephritis.

9. Nephrosis.

10. Defects of speech and hearing, either singly or combined.

11. Convulsive disorders.

Patients are acceptable if they are of sound mentality and under the age of 21 years. Diagnostic services are free regardless of economic status. Treatment services purchased by the agency are only for patients who are medically indigent. All patients receiving any services must be referred by a physician.

MAINTENANCE OF A STATE REGISTER FOR CRIPPLED CHILDREN

An attempt is made to maintain a state register of crippled children including every individual — regardless of economic status, need of medical care, or availability of treatment — who is under 21 years of age, is a resident of the state, has a type of crippling condition acceptable to the approved State plan, and has had his crippling condition diagnosed by a licensed physician. Such a register is important for case finding, program building, and legislative planning.

ADMINISTRATIVE DIAGRAM State Board of Education President. State University of Iowa Provost SSCC Orthopedic Consultant, Executive Official Pediatric Consultant, Head of Department of Pediatrics Head of Department of Orthopedic Surgery Director Director of Nursing Supervising Medical Social Secretary Speech & Records Librarian Occupational Orthopedic Senior Hearing & Physical Pediatrician and Office Therapist Surgeon Statistician Director Consultant Therapy Manager Consultant Medical Social Physical Therapist Public Health Nurse Clerical Consultants & Nurses Staff Consultants Hospital - School Mobile (Field) Permanent for Severely Hospital Convalescent Homes Clinics Ctinics & Foster Homes Handicapped Service Children

---- Advisory Committee

Names of crippled children placed on the register come from several sources as follows:

1. Those receiving services at University Hospital, State University of Iowa.

2. Those referred to mobile field clinics.

3. Those reported to the State Health Department by means of birth certificates or reportable diseases.

4. Those brought to the attention of the State Services for Crippled Children's field staff, public health or school

nurses in other ways.

5. Those reported to other agencies such as the State Department of Public Instruction, Division of Vocational Rehabilitation, Department of Social Welfare, Division of Child Welfare, Iowa Society for Crippled Children and Adults, Iowa Chapter of the National Foundation for Infantile Paralysis, and others.

. Those under the care of and reported by the attending phys-

ician.

The official register contained 12,146 names as of December 31, 1949.

NUMBER OF CHILDREN SERVED

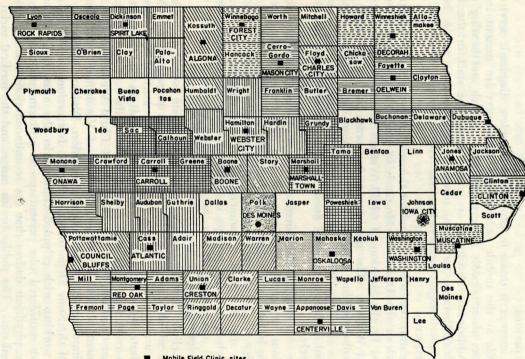
Since the beginning of the Iowa State Services for Crippled Children in July, 1936, 14,671 children have received service. The names of 5,849 children have been removed from the register for such reasons as having reached the age limit, moved from the state, or died. From April 1, 1946, to March 1, 1948, the group of children under State Services for Crippled Children care resulted in 10,942 clinic visits, 6,106 hospital admissions, and 174 admissions to sanatorial (convalescent) care. During the year 1949, 2,456 children were examined at 24 field clinics throughout the State.

STATE SERVICES FOR CRIPPLED CHILDREN CLINIC SERVICES

1. Field Clinics. From November 19, 1936, to May 2, 1941, thirty diagnostic clinics were held in 28 different counties in conjunction with and at the request of county medical societies. These mobile clinics were discontinued in October, 1941, and were replaced by permanent diagnostic clinics at designated centers. These clinic centers were established at the request of county medical societies, depending on availability of funds to maintain these clinics, and are held annually at local hospitals which provide the space for conducting the clinic, laboratory facilities, and x-ray services. Twenty-four permanent field clinic centers which serve 75 counties are established at this time. The locations and areas which are covered by these clinics are indicated on the map on the following page.

The family physician's request for a patient's examination at a field clinic is the major factor in determining eligibility for admission

STATE SERVICES FOR CRIPPLED CHILDREN CLINICS AND CLINIC AREAS



- Mobile Field Clinic sites.
- Monthly clinic limited to cardiac patients.
 - Agency office and Permanent Clinics site. Counties with like shading indicate Mobile Field Clinic greas

to the clinic. No indigency requirement exists for this field clinic service. The patient is referred to the clinic by his physician and this referral card is accepted as the patient's official admission to the clinic.

Most patients are transported in privately owned cars by volunteer groups, local nurses, directors of social welfare, and other in-

An attempt is made to provide as complete diagnostic services as practicable at the mobile field clinics. Examiners are present in the specialities of orthopedic surgery, pediatrics, speech and hearing pathology. Additional consultants are members of the staff in the fields of physical therapy, nutrition, medical social service, public health nursing, psychology, vocational rehabilitation, special education, and dental hygiene.

The nutritionist is supplied for this service by the State Department of Health or the University Hospitals in Iowa City. Psychologists are furnished by the Division of Child Welfare in the State Department of Social Welfare. The participants in vocational rehabilitation and special education are members of the Division of Vocational Rehabilitation in the State Board of Vocational Education and the Division of Special Education in the State Department of Public Instruction respectively.

The results of the examination, reports of consultants, and recommendations for management are sent as a unit record to the referring physician following the clinic. The field clinic service is a consultation service for the local practitioners and the decision relative to accomplishing any suggested recommendations rests entirely with the referring physician. An attempt is made to effect recommendations in the local community as far as community resources permit, when such is desired by the family and physician.

Post-clinic conferences are held four to six weeks following a clinic at which time reports of clinic findings pertaining to selected patients are presented by the field nurse and medical social worker of the State Services for Crippled Children's staff in that area. Attending this conference are local nurses, social welfare groups, educators, and representatives from the Division of Child Welfare of the State Department of Social Welfare, Division of Vocational Rehabilitation of the State Board for Vocational Education, Division of Special Education of the State Department of Public Instruction, as well as other groups working with crippled children in the area. Only those patients are considered who present special problems and for whom the referring physician desires that the recommendations made previously be carried out. The public health nurses and the medical social field staff of the State Services for Crippled Children act as an integrating factor between the patient and agencies in the local community or the University Hospitals at Iowa City.

A further service attempted by the field staff is to follow all cases in an effort to avoid delinquency of the patient in continuing as complete a medical plan as possible. This field service is of value in aiding the patient to carry out specific recommendations. Frequently medical treatment is indicated and instituted but for one reason or another is not completed. Field service is important in these instances in learning the reason for the discontinuance of care on the part of the patient's family, and interpreting the need for continued treatment. Care is often resumed and further crippling or permanent crippling may be avoided with some readjustment of these circumstances which

have interfered with the plan of treatment.

2. Permanent Clinics. The Orthopedic and Pediatric out-patient services of the College of Medicine at the State University of Iowa Hospitals are sites of the permanent clinics. Orthopedic Clinic sessions are held four afternoons and pediatric clinic sessions are conducted five afternoons each week. In addition, special clinics in pediatrics are held weekly on separate days and are designed for children with crippling due to cardiac, diabetic, convulsive disorder, speech and hearing, and other conditions included in the approved State Services for Crippled Children's program. Admission to the permanent clinics is accomplished by means of one of the following procedures:

1. Legal commitment through the Perkins-Haskell-Klaus Acts (the Acts mentioned under Financial Participation of the

State).

2. Authorization by the local physician by means of a clinical pay certificate (clinical pay patients receive care on the public ward of the hospital and pay for services at the rate of \$9.50 per day plus reduced rates for special examinations).

3. Authorization by the Director of the State Services for Crippled Children Agency for medically indigent patients in situations where legal committment through the Perkins-

Haskell-Klaus Acts is impossible.

Out-patient treatment services are provided at the clinics in the Uni-

versity Hospitals in Iowa City.

Personnel participating in the hospital clinics include the director of State Services for Crippled Children, orthopedic surgeons, and pediatricians on the faculty of the College of Medicine of the State University of Iowa, medical social workers, public health nurses, clinical clerks and clinic nurses. Most crippled children coming under the definition of the state plan who are admitted to the clinics at the University Hospitals are given a preliminary examination by a qualified pediatrician on the University Hospital staff preceding the examination in the orthopedic clinic when orthopedic crippling is present. The findings of this examination are recorded and available at the time of the orthopedic examination.

All findings and recommendations for treatment made at the permanent clinics are compiled in the form of a unit record. The information in this unit record serves as material for follow-up work by the medical social workers and the public health nurses of the State Agency staff. A medical social worker and a public health nurse

are in attendance at as many of these permanent clinic sessions as their time permits. They interview the parents and consult with the physicians making the examination. An attempt is made to develop a program for the complete care of the child in this manner.

3. Cardiac Clinic in Des Moines. A monthly free cardiac clinic for indigent children residing in Polk County was inaugurated at Broadlawns Hospital in Des Moines in 1940 under the direction of the State Services for Crippled Children with the close cooperation of the pediatricians of that city. The clinic is held approximately four times each year at the present time, depending on the current case load. Patients are referred to the clinic through the Public Health Nursing Service of the county and the Junior League Convalescent Home in Des Moines. Examinations are conducted by a qualified pediatrician. Reports of many of these examinations are sent to the State Services for Crippled Children's office and suggestions for follow-up care are made from these reports.

FUNCTIONS OF THE FIELD STAFF

- 1. Public Health Nurse Consultants. The public health nurse consultants on the staff of State Services for Crippled Children are registered nurses who hold a degree or certificate in public health nursing and who have had graduate work or experience in physical therapy, orthopedic or pediatric nursing. These nurses working in an assigned district interpret the medical recommendations for crippled children to the patient and family, to workers in health, welfare, or education, and to other interested persons planning further service to the patient by means of consultation, teaching, and demonstration. Direct nursing service may be given by these nurses to handicapped children throughout the state, according to medical recommendations, in the absence of local public health nursing service. An attempt is made to keep active planning for the crippled child in the jurisdiction of the local community, that is, the referring physician, local public health nurses, local welfare workers, and other interested persons. The nurses on the staff of the State Services for Crippled Children may function as liaison agents between the patient, the local workers, and the hospital or clinic. They also participate in the planning for and conducting of the mobile field clinics and the post-clinic conferences which are sponsored by the State Services for Crippled Children Agency.
- 2. Medical Social Consultants. The medical social consultants of the State Services for Crippled Children staff are university graduates with Masters degrees plus supervised experience in hospital and clinic medical social work. Each consultant works in an assigned district of the state where she acts as a medical social consultant in the interest of patients included in the approved State Services for Crippled Children's program. This service may be directed toward state and federal agencies, local social welfare and health agencies, child welfare

services, schools, courts, religious and civic organizations, and other interested persons.

These consultants function as liaison agents between the patient and the community, between the patient and the University Hospitals, and in many instances between the patient and his own family. They report the medical needs of children leaving the State to the proper agencies in the state in which the patient establishes residence. locate and plan for continued medical care for all non-resident crippled children reported to this Agency from other states. They take an active part in the planning and conducting of mobile field clinics and post-clinic conferences. They are prepared to interpret the Crippled Children's program to interested groups and organizations. They are directly responsible for the case work accomplished for the studentpatients in the Hospital-School for Severely Handicapped Children and for the planning for their management after discharge. Exchange of social information between the Medical Social Service Department of the University Hospitals and that of this Agency is made frequently. Direct service to patients is not given unless such is requested by the responsible agency.

MEDICAL SOCIETY MEETINGS HELD IN CONJUNCTION WITH MOBILE FIELD CLINICS

Many county medical societies arrange for a meeting of the physicians in a clinic area the evening preceding a mobile field clinic. A scientific program is presented by the State Services for Crippled Children professional staff at most of these meetings.

HOSPITALS USED UNDER THE STATE PLAN

The hospitals used under the state plan are the 700 bed General Hospital and the 200 bed Children's Hospital which are units of the University of Iowa Hospitals at Iowa City. These hospitals are staffed by full-time physicians and surgeons, all of whom are professors or instructors in the College of Medicine at the State University of Iowa. No professional fees are charged for their services. A greater number of patients are able to receive care because of this free professional service.

Hospital care is authorized by the state law pertaining to indigent patients through the county commitment procedures. When an obstacle to commitment exists such as the Iowa Legal Settlement Law, or failure to obtain commitment because of a lack of local resources, hospitalization may be authorized and paid for from Federal Funds through the State Services for Crippled Children.

The University Hospitals, and particularly the Children's Hospital, are the only hospitals used by the State Services for Crippled Children. These hospitals meet the standards recommended by the Children's Bureau. No distinction is made in the selection of children because of creed, color or race.

APPLIANCES

Funds of the State Services for Crippled Children may be used for purchase of appliances, such as braces, artificial limbs, hearing aids, and glasses, for children receiving diagnostic and treatment services under the approved state plan. The State University Hospitals maintain a well-equipped brace and appliance shop. This shop has a full-time staff paid by State Funds.

FINANCIAL PARTICIPATION BY THE STATE

Under the Perkins-Haskell-Klaus Acts, the State of Iowa provides for the treatment and care of the indigent, sick, and crippled of the State, at the University Hospitals in Iowa City, Iowa, at state expense. The State Board of Education has been designated by law as the official state agency for the administration of these Acts in Iowa. To meet the requirements of these Acts, the State Board of Education of the State of Iowa maintains two hospitals at the College of Medicine of the State University of Iowa which are the General and Children's Hospitals. Each session of the General Assembly of the State of Iowa appropriates funds for the maintenance of these hospitals. The entire appropriation is expended for the care of indigent patients.

RULES PERTAINING TO THE ADMISSION OF PATIENTS TO THE UNIVERSITY HOSPITALS

Patients may be admitted to the University Hospitals under the following arrangements:

 State patients may be admitted and treated at the expense of the state after complying with the necessary requirements as prescribed by law (Chapter 255, 1946 Code of Iowa) as follows:

> Application may be made to the clerk of any juvenile court in the county of residence. Should the county authorities see fit to commit a patient as a state case after investigation including an examination by a competent physician and surgeon, papers will be executed by them in accordance with the provisions of the law. It should be emphasized that the law places the authority for commitment of state patients entirely in the hands of the officials of the county concerned, and the hospital has no jurisdiction whatever in the arrangements to be made. Prospective patients must deal, therefore, directly with the county authorities in all matters relating to commitment. Patients should not come to the hospital until notified to do so by the hospital authorities. Transportation, even though allowed by the commitment order, cannot be paid those patients who come without permission granted by the hospital. Thus, a definite appointment

must be made for each patient before reporting to the

hospital for treatment.

"Clinical pay" patients are those whose families are able to pay a part of the expense for treatment. They receive care on the public ward of the hospital at the rate of \$9.50 per day plus cost rates for medications, X-ray services, and other special procedures. No professional fee is charged. Medical referral is required from the local physician. No legal commitment exists in these situations and the physician's referral of the patient on a special "clinical pay patient application" form forwarded to the admissions office of the University Hospitals, Iowa City, Iowa, completes the procedure of application for treatment. An appointment is made and the patient is notified of such by the hospital authorities upon receipt of the completed "clinical pay patient application" form. The patient is expected to appear for services on his appointment date, arranging for his own transportation to and from the hospital.

3. Private patients are those who are able and willing to pay for private hospital care and physician's fees. These patients may be referred directly to the physician whose services are desired or the referral may be made directly to the department in which services are sought. Appointments are made and the patient notified by the hospital physician or the private clinic of the department con-

cerned.

4. Medically indigent patients under 21 years of age who have a crippling condition included in the approved State Services for Crippled Children plan, but who are unable to obtain legal commitment under the law, may be admitted and treated at the University Hospitals with the expense paid from Federal Funds administered by this Agency. Application may be made to the Director of the State Services for Crippled Children, State University of Iowa, Iowa City. Referral is requested from a local physician or from a similar agency in another state. Evaluation of the family's ability to pay for services, the need for medical care, and the reasons preventing legal commitment are made by the Agency staff. Acceptance for the patient's care is dependent upon this complete investigation. When final approval for care is granted, the patient is given an appointment at the University Hospital and receives the services needed in the usual manner.

TRANSPORTATION TO THE HOSPITAL CENTER

The hospital operates an ambulance system throughout the state and reserves the right to handle all state patients to and from the hospital when the court commitment allows transportation at the

expense of the State.

A vast majority of children are conveyed to the State University Hospital clinics by means of these hospital ambulances. Each ambulance can carry five patients on each outgoing and incoming trip. Only indigent patients are carried in these cars. Those who pay something toward their medical care, often provide their own transportation or are helped through agencies in their own communities.

REQUIREMENTS AND PROCEDURES WITH REGARD TO ACCEPTANCE FOR CARE

Any indigent crippled child coming under the approved State Services for Crippled Children plan who is a legal resident of Iowa, is accepted for treatment and care at the Hospitals of the College of Medicine at the State University of Iowa, provided that such child is of sound mentality and his condition is such that there is some hope for improvement or cure of the condition in the judgment of the staff so far as available funds permit. All such children must be committed according to the laws of Iowa.

Application for hospital care of the crippled child may be made to the State Services for Crippled Children in certain instances. This is particularly applicable where the problem of non-residence is found as a result of which the patient cannot be admitted to the hospitals in accordance with the regular state indigent law. Patients are considered individually depending upon the immediate need for treatment, promise of benefit from treatment, and economic circumstances of the parents. Acceptance will be given following social investigation and consultation with the family physician. Payment for such patients is made directly from the hospitalization fund of the State Services for Crippled Children which is received from federal sources.

CONVALESCENT CARE

Good convalescent treatment for crippled children includes medical supervision, nursing care, physical therapy, occupational therapy, medical social service, a daily educational program, recreation, an essential dietary regimen, and an attempt to provide optimum emotional surroundings.

Such facilities are available on the wards in the Departments of Pediatrics and Orthopedic Surgery of the State University of Iowa Hospitals for sanatorial care for a limited number of children who have rheumatic heart disease and other long term illnesses coming under the plan of the State Services for Crippled Children. This convalescent care is provided by the University Hospitals under the supervision of the State Services for Crippled Children's Agency. An attempt is made to provide complete convalescent care. Weekly convalescent conferences are held by the staff for consideration and planning for individual patients in the convalescent units. No distinction is made as to race, color, or creed in the selection of patients.

Similar convalescent care is provided in the Junior League Convalescent Home in Des Moines for patients residing in Polk County. A small number of patients with crippling conditions included in the approved plan receive care in this home by means of funds provided by State Services for Crippled Children.

CEREBRAL PALSY SCHOOL IN DES MOINES

Care which is required for many cerebral palsied children is similar to that mentioned for convalescent treatment above. Greater attention to physical therapy, occupational therapy, speech therapy, and special education may be necessary in individual patients. A very limited number of facilities to provide this type of care are present in Iowa. The Hospital-School for Severely Handicapped Children in Iowa City (described in later pages) and the Cerebral Palsy School in Des Moines provide this needed treatment for small groups of children.

The Cerebral Palsy School in Des Moines is a day school offering treatment under the sponsorship of the Iowa Society for Crippled Children and Adults. Patients are accepted from any locality in the State. Applications for care are made to the Executive Secretary, Iowa Society for Crippled Children and Adults, 2917 Grand Ave., Des Moines 12, Iowa.

A small number of children have received care in this school from the use of Federal Funds administered by the State Services for Crippled Children. Reports pertaining to these patients are made periodically to this Agency and recommendations or arrangements for after-care are suggested when indicated.

BOARDING HOME CARE

Temporary boarding home care is provided in Iowa City by the State Services for Crippled Children for patients who may not return home because of adverse environmental conditions or because they should remain near the hospital for close observation or treatment. Funds are provided in instances where local resources are not available.

Standards for care of children in boarding homes have been set up by the Subdivision of Child Welfare under the Board of Social Welfare in Iowa, which is the legal licensing agent. Boarding homes are supervised by the State Child Welfare Workers who may also consult with the field staff of the State Services for Crippled Children on individual cases. No distinction is made as to race, color, or creed in providing for boarding home care.

RELATIONSHIP WITH PRIVATE PHYSICIANS

The State Services for Crippled Children is desirous of fostering and maintaining a close family physician-patient relationship in all of its activities. For this reason the Agency program is conducted with active cooperation of the State and County Medical Societies as much as possible. A physician's referral is requested on all patients receiving

services in the State Services for Crippled Children program. Disposition of medical problems on individual patients is made only through the consultation with and the advice of the family physician.

RELATIONSHIP WITH OTHER AGENCIES

The activities of the State Services for Crippled Children are promulgated in cooperation with other agencies. Close working relationships exist with the State Department of Health, State and local Departments of Public Welfare, State Department of Public Instruction, State Child Welfare Services, State Division of Vocational Rehabilitation, Iowa Society for Crippled Children and Adults, the State Chapter of the National Foundation for Infantile Paralysis, local Visiting Nurses Services, and others interested in crippled children.

EDUCATION

Education and preparation for life's work presents a major problem in handicapped children. Frequent use is made of the facilities offered by the Iowa Department of Public Instruction for handicapped children in the public schools. Children of normal mental ability under 21 years of age and who have not completed high school are eligible for the services. These services consist of transportation to school, home instruction, or inter-communication equipment for the classroom instruction direct to those unable to attend school. The following is quoted from the Bulletin of the State of Iowa Department of Special Education in Iowa Schools in 1949:

1. Special Education Relationships

INVESTIGATING THE NEED

"Investigating the need, the very first step in special education service is that of determining the nature

and the extent of the problem. For a number of years county superintendents have been required to report annually to the Department of Public Instruction (Chapter 271.11 [13] and Chapter 281.5, Code of Iowa, 1946) the names, handicaps and pertinent information concerning all children of school age who deviate from the accepted normal public school pupils. These reports are available for use. The State Board of Health, the State Crippled Children's Service and various other agencies are furnishing available information.

"In addition to those sources it is proposed that in initiating a special education program in a district, each child of elementary and first and secondary grade, together with pre-school and high school children ranking as probably handicapped, will be screened by a team of special workers. Those found to be handicapped will be referred for appropriate professional care and for certification after which they will be assigned for instruction and training to indicated special education classes or facilities.

SPECIAL INSTRUCTION

"The local need having been determined, the division will in every possible way assist local school authori-

ties in setting up necessary schools, classes, or home instruction units, in providing necessary special supplies and equipment. and in recommending indicated pupils for special care as may be required. The principle of providing remedial instruction in the regular class-

room if at all possible and in any event at the nearest point practicable, is being safeguarded. Supervision by a competent, trained, certificated, and accessible educator is recognized as essential. Assistance in securing necessary teachers and supervisors is a proffered service of the Division.

REIMBURSEMENT OF EXCESS COST

"The statutes provide that each school district which has maintained a special education program previously approved by the Division of Special Education, shall be reimbursed the amount by which the total cost of

the special education program exceeds the cost for an equal number of pupils in the regular curricular program of the district."

2. Perkins School

A school is maintained in the Children's Hospital at Iowa City so that a child who must remain at the hospital for a long period of time and who is physically able to do school work may maintain his school grade level.

3. School for Convalescent Patients.

Two bedside teachers are provided for patients in the Convalescent Unit of the Children's Hospital in Iowa City. The operation of this school including the total program of care is under the supervision of the State Services for Crippled Children.

COOPERATION WITH THE DIVISION OF VOCATIONAL REHABILITATON

The services of the State Board of Vocational Education are employed when a child has received the maximum physical reconstruction possible and is 16 years of age or over. The Division of Vocational Rehabilitation offers an individual service for the vocational training of persons over 16 years of age who have permanent physical defects or infirmities that are sufficient to create a vocational handicap. A representative from this division attends the State Services for Crippled Children Mobile Field Clinics and initiates vocational planning for patients who are eligible for and will profit from the vocational program.

HOSPITAL-SCHOOL FOR THE EDUCATION AND TREATMENT OF SEVERELY HANDICAPPED CHILDREN

1. Creation and Purpose. The Iowa Hospital-School for Severely Handicapped Children was created by an Act of the Iowa 52nd General Assembly. Its purpose is to provide educational opportunities and medical treatment for severely handicapped persons who are educable and who are not able to receive such education in any other regularly established agency of the state, or who are not eligible for admission to already established special schools. Since the majority of the studentpatients are limited in freedom of movement and since they come from all parts of the State, the Hospital-School is designed to operate a resident school providing complete care for the child.

The Hospital-School is one of the educational and medical services of the State University of Iowa and is conducted in conjunction with the activities of the Children's Hospital, the College of Medicine,

and the College of Education.

Training of workers in the various phases of management of the

handicapped child is as important to the State of Iowa as are the services rendered to the individual patients. These facilities in Iowa City can never be expected to care for more than a very small per cent of the total number in the State who could profit from such an organization. Development of facilities of this type elsewhere throughout Iowa is hampered seriously by the lack of qualified workers. For this reason, this Hospital-School has an obligation for the training of workers which is as important as is the service to the individual student-patients. The association of this activity with a great university and medical center enhances the training aspect of this Hospital-School.

2. Location. The Hospital-School operates in temporary quarters that have resulted from remodeling a portion of the basement wing in the University Hospitals' Nurses' residence in Iowa City. The number of patients who can be accommodated for residence care at any one time in the present temporary quarters does not exceed twenty.

3. Eligibility for Admission. It is the policy of the school to admit those student-patients who are judged capable of profiting from the medical and educational resources of this school in accordance with legislation establishing the Hospital-School for Severely Handicapped Children. The children given preference in admission are those who give the greatest promise of being capable of self-support in the community or who can profit from such education and medical service, thereafter being more adequately managed in their home situation. The applicant must be a resident of Iowa.

4. Age. Preference is given to children between the ages of 3 and 10 during the period of operation in limited temporary quarters.

- 5. Types of Patients. Persons are eligible for admission who are educable but severely handicapped, physically and educationally, as a result of cerebral palsy, muscular dystrophy, spina bifida, arthritis, poliomyelitis, or other severely handicapping conditions. Persons who are not eligible for admission are those who are acceptable to the schools already established for the deaf, blind, epileptic or feebleminded.
- 6. Application Procedures. Application forms may be obtained from, and when completed, should be returned to: Hospital-School for Severely Handicapped Children, State University of Iowa, Iowa City, Iowa. The Committee on Admissions for the Hospital-School considers the application. The applicant is given an appointment for an examination at Children's Hospital in Iowa City if he is believed eligible for admission and it seems likely that there will be a place in the Hospital-School available for him soon. This examination is designated to determine to what extent the Hospital-School's treatment and educational program can be of value to the child. It comprises a complete medical examination, a study of the social conditions involved, an estimate of the educational potentialities, a psychological study, and any other special examinations that are considered necessary.
 - 7. Treatment and Education. Constant medical and nursing super-

vision is provided the student-patients and an intensive therapy program is attempted by the Hospital-School. This program consists of physical, occupational, recreational, speech, and play therapies in addition to the educational plan. Psychological services in play therapy are used to help the patient adjust to his handicapping condition in relationship to his family, local community, and other situations. The educational program is conducted by teachers experienced in working with handicapped children and is individualized to the given student-patient in most instances.

COMMUNITY PARTICIPATION

The field services of the Agency are given chiefly on a consulting basis although direct medical service is rendered by the State Services for Crippled Children in some instances when requested. Therefore, this Agency is dependent upon other agencies, community groups, and individuals in the State to give direct service to the crippled child in many instances. Arrangements for medical care which include the determination of the patient's economic status, provisions for transportation, and home and school adjustment during care, are made in consultation with the county offices of the State Board of Social Welfare or the County Offices of the Overseer of the Poor. Public Health Nurses, such as county nurses, school nurses and visiting nurses, give invaluable assistance in locating crippled children, guiding them, securing adequate treatment, and supervising after-care in the local community.

Local volunteer agencies also are active in providing individual services to these children. The Iowa Society for Crippled Children and Adults represents an organization which is interested in the welfare of the handicapped child. County chapters of this organization in some areas have been active particularly in locating, transporting, and providing comforts for patients examined at the State Services for Crippled Children Mobile Field Clinics.

Valuable assistance is provided this Agency by other local civic minded organizations and persons in conjunction with the State Services for Crippled Children Mobile Field Clinics conducted in the various centers. This service consists of providing transportation for patients, registration of patients, assisting examiners, directing the routing of patients, and by assuming other duties which are helpful to the smooth operation of the clinic.

PROCEDURE FOR ESTABLISHMENT OF A MOBILE FIELD CLINIC

Approximately one-fourth of the counties in Iowa do not receive mobile clinic services at the present time. County Medical Societies of some of these counties have requested such services in the past but expansion of clinic services was not deemed feasible then due to inadequate Agency staff personnel. It is hoped that expansion of this part of the services may be accomplished in the very near future.

An attempt is made to establish a mobile field clinic in an area

not receiving this service after the County Medical Society has submitted a request that measures be taken to establish such a clinic. The request should be made to the Director, State Services for Crippled Children, State University of Iowa, Iowa City, Iowa. The Director or other Agency staff members are happy to interpret the services to interested groups when such is desired.

FUTURE OBJECTIVES OF THE PROGRAM

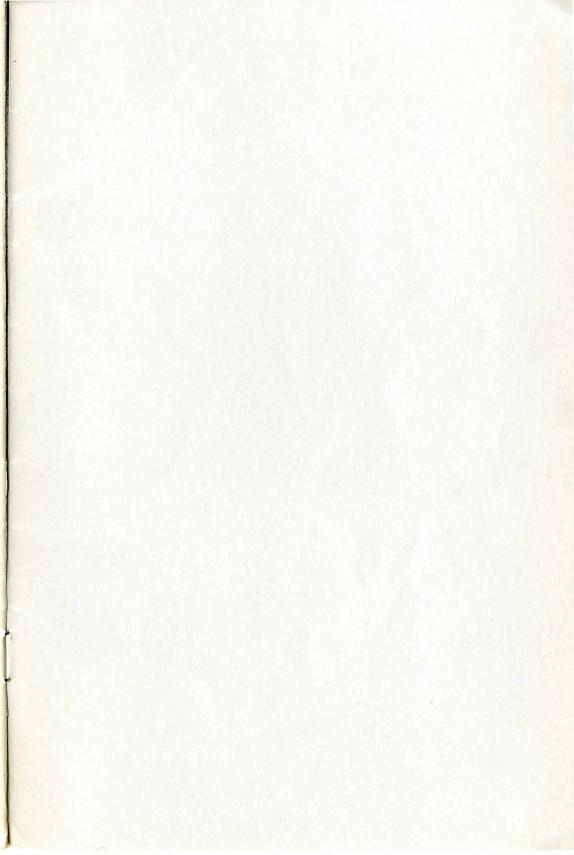
The program for crippled children in Iowa has been directed toward the salvage of the crippled child in a symmetrical manner. Attention is focused on the child's complete development in addition to his medical and surgical needs. It is hoped that each child receiving services may be equipped to take his place in life better and be a worthwhile member of society by having a well rounded program of physical care and attention to educational, recreational, vocational, and

emotional needs.

Future plans for the State Services for Crippled Children Agency in Iowa include attempts to maintain a complete and current register of patients with crippling conditions, to expand field clinic services to all counties desiring the services, to establish a more efficient follow-up program, eventually to establish district crippled children's offices throughout the state, to work toward a greater coordination of efforts among all agencies dealing with handicapped children and youth planning, and to accept an even broader classification of crippling conditions in the program. The scope of the Crippled Children's Service will be so enlarged that within the funds available, the greatest good will be brought to the greatest number.

The State Services for Crippled Children is anxious to serve all eligible children in Iowa. Anyone interested in a crippled child who would benefit from the services available is requested to contact his family physician or write to:

STATE SERVICES FOR CRIPPLED CHILDREN
STATE UNIVERSITY OF IOWA
IOWA CITY, IOWA



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